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contrast to the other type of action; the anæsthetic type can sometimes be maintained for long periods in fatiguing positions, (if the muscles are not put to a maximum exertion), without fatigue. Points of resemblance in the long continuance of moderate contraction are shown between this second type and suggested catalepsy and contractures. These types were not found in all subjects, nor must they be too closely connected with sensibility and anæsthesia. From the detailed observations of the article we cull the following. In hysterical hemianæsthesia the sound side is generally increased in power, in hysterical hemiplegia even more so. The dynamometric pressure is greater in each hand when acting by itself than in conjunction with the other, (a fact which Binet explains by the difficulty which hysterics experience in dividing their attention); the bilateral dynamographic curves are longer and flatter than the unilateral; and the reaction-times are much longer for both hands, especially on the anæsthetic side, when reaction is made with both hands than when each reacts by itself.

Recent experiments in crystal-vision. Proc. of Soc. for Psych. Research (Eng.). June, 1889.

The first half of this paper is devoted to an interesting historical account, from which it appears that "crystal-vision," under various names and making use of various reflecting surfaces, (bowls of water, gems, mirrors, pools of ink in the palm of the hand, sword blades, and even finger-nails), some times to communicate with the gods, some times with devils, openly or under ban, has been practiced for 3000 years in Europe, Asia, Africa, and the ends of the earth. The crystal-gazer looking into some one of these polished surfaces sees more or less elaborate visions. The lady who contributes the article has herself this uncommon faculty, and speaks from personal experience of upwards of 70 cases. If she has a grain too little skepticism as to telepathy, she nevertheless approaches the subject in an eminently matter-of-fact and open-minded fashion. Her experiences fall into 3 groups: "1. After-images or recrudescient memories, often rising thus and thus only from the sub-conscious strata to which they had sunk. 2. Objectivations of ideas or images (*a*) consciously or (*b*) unconsciously in the mind of the percipient. 3. Visions, possibly telepathic or clairvoyant, implying acquirement of knowledge by super-normal means." Under the first come casual impressions *e. g.* of objects seen on a walk, completely forgotten, later seen in the crystal, and with difficulty traced to the original circumstances. Under the second are classed (*a*) the images called up by the gazer, (*e. g.* groups of figures that, once voluntarily projected into the crystal, go on to actions quite unexpected by the gazer), or things that lie "on the mind," though not actually in consciousness; (*b*) odds and ends of images from the unconscious, to which the author refers as in general "so grotesque and commonplace" as "not to administer greatly to one's self-esteem." Of the third class not very many are reported, and none of these have reference to important events, unless it be one, which may be taken as a sample of all, where the crystal revealed a man with a muffled face looking into a small window from the outside, an image which was realized a few days later in the case of a fireman when the house was on fire and a muffled-face fireman looked into such a window. Some of these visions were so fully objective that their parts could be enlarged with a magnifying glass. The author confesses to more than ordinary powers of visualization without her crystal.

Versuche über den Einfluss des Schlafes auf den Stoffwechsel. H. LAEHR. Allg. Zeitsch. f. Psychiatrie. 1889. p. 286-317.

While the amount of nitrogen given off does not change, it is known that in sleep less carbonic acid is given off and less oxygen is taken up

by the system, or less fat but the same amount of albumen is decomposed. Laehr divided the day into three equal periods of eight hours, at the beginning of each of which he urinated, was weighed and took food of exactly equal kind and amount. By these more constant conditions than have been hitherto observed, he slept from 11 to 7. From these experiments which have been repeated at intervals for more than eight years, the following results were reached: Sleep is attended by a decrease (not an increase as Quincke had said) in the amount of urine secreted, its acid reaction is greatly reduced, its chloride is much decreased, and urea and sulphuric acid are slightly less. A recumbent position causes slight increase of urine and of the above substances, as well as of phosphoric acid. The latter, as well as lime and magnesia constituents of urine are unaffected.

V.—ABNORMAL.

Beitrag zur Lehre von der Infectiosität der Neurosen, von Dr. B. HERZOG. Arch. Psychiatrie, 1889., p. 271.

In psychic infection, induction, or contagion, which Werner has lately denied, while Wollenberg ascribes to it a greater rôle than was ever suspected before, is predisposition all, or is there a very specific effect, and if the latter, does it work upon the secondary subject while he is only passive or has his imitative instinct causal action? From two interesting cases the writer concludes that imitation is a part of the disposition, or a symptom of already existing disease. The second individual is as passive in his imitation as in hypnotic suggestion.

Ueber das Symptom der Verbigeration, von Dr. C. NIESSER. Allg. Zeitsch. f. Psychiatrie, 1889, pp. 168-232.

Although first described in connection with Katatonia by Kahlbaum in 1874, this symptom has been little studied. It is a "speech-cramp" which may occur with very diverse, but not with all dysthymia. It is a symptom of as great dignity and independence as idea-flight, or auditory hallucinations. Its characteristics may occur in the writing of the insane as well as in their speech. It is very diverse in its manifestations. A fragment of prayer, a single word, or interjection hissed between the teeth, whined, mumbled, low or loud, fast or slow, perhaps with florid gesticulation, are long repeated; or discourse and even writings with frequent repetitions mark these cases. It is more often associated with states of motor inhibition. From many heterogeneous cases an unitary etiological conception is sought.

Die Hallucinationen im Muskelsinn bei Geisteskranken und ihre klinische Bedeutung. Dr. A. CRAMER. Freiburg, 1889, pp. 130.

Centripetal nerves from muscles, whose specific energy it is to bring motor sensations to the brain, play an important rôle in paranoia. Their disorders may excite hallucinations in the locomotor apparatus, causing imperative motions, attitudes and acts; in speech mechanisms, causing loud-thinking and imperative speech; or in the eye muscles, causing illusions concerning motions, direction of motions, size of objects, etc. These rubrics are illustrated and confirmed by well selected and treated clinical histories.

Les agents provocateurs de l'hystérie. G. GUINON. Paris, 1889, pp. 392.

This work is full of most carefully selected and interesting casuistic material. The causes are: 1. Moral, as education, imitation, hypnotic experiments; 2. Shocks, like wounds, earthquakes, lightning; 3. Infections, as typhus pneumonia, malaria, scarlatina, rheumatism; 4. Weak-